# Comprehensive Transitional Case Management for Ex-offenders living with HIV/AIDS in Maryland

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# My Internship

The Maryland AIDS Administration Issued an RFP from community organizations to address the needs of Baltimore City's returning prisoners that are living with HIV/AIDS

The goals of my internship were to work with Nathalia Drew to:

- Understand the nature and magnitude of Baltimore City's returning prisoner population
- Understand needs specific to HIV-infected returning prisoners
- Participate in selection of proposals to address these needs and develop a standard of care to be adopted for transitional case management

# Terminology

- Reentry, reintegration, recidivism
- Convict, Inmate, Prisoner, Ex-offender, former prisoner
- Discharge Planning
- Transitional Case Management
- Prison vs. Jail vs. Detention Center
- Local, State & Federal

#### Mass Incarceration

- There were over 2 million adults incarcerated at year end 2004, of which over 1.5 million were held in State or Federal prisons
- Between 1980 and 2001, Maryland's prison population more than tripled, jumping from 7,731 to 23,752
- 1 in 3 black males, 1 in 6 Hispanic males and 1 in 17 white males are expected to go to prison during their lifetime

#### HIV & Incarceration

- Correctional authorities reported that 22,028 State inmates and 1,631 Federal inmates were HIV positive in 2003
- States with the highest percentages of HIV-positive prisoners are New York (7.6%), Maryland (4.2%) and Texas (3.9%) with HIV prevalence among prisoners more than 20 times that in the non-incarcerated population
- Recent estimates suggest that up to 25% of people living with HIV pass through the correctional system every year

# Returning Prisoners

- The number of former prisoners in the U.S. has increased by 2.7 million in past 30 years with 630,000 released annually
- Maryland's number of released prisoners nearly doubled in the last 20 years from 5,436 to 9,448 annually
- Re-entry and recidivism combine to create a revolving door through which prisoners circulate
- Recent studies estimate that an average of 60% of returning prisoners are re-arrested within 2 yrs

# Reentry in Maryland

- 6 out of 10 released inmates return to Baltimore City
- Return is concentrated in six highly disadvantaged Baltimore communities, which each received 159 to 277 prisoners: Southwest Baltimore, Greater Rosemont, Sandtown-Winchester/Harlem Park, Greenmount East, Clifton-Berea, and Southern Park Heights
- In 2001, 17 percent of Maryland inmates took part in educational or vocational programs, 45 percent had work assignments such as sanitation or food service, 7 percent participated in a work-release program, and 31 percent were in no programmatic or work activities

#### The Needs of Ex-offenders

- The Maryland Office of Employment Development identified the following needs in its re-entry task force:
- Provide a comprehensive menu of services that remove barriers to employment and promote exoffender job readiness
- Increase coordination among agencies and service organizations to ensure that ex-offenders are aware of, and have access to, available resources and services.
- Advocate to impact legislative areas that impede exoffender employment

# Addressing Reentry in Baltimore City

- In response to the task force finding the MOED established the Baltimore City Re-entry Center
- This center provides comprehensive career planning, educational and support services to the returning ex-inmate population
- This re-entry center is the only state funded comprehensive re-entry center of its kind in the country

# Addressing the Needs of Ex-offenders Living with HIV/AIDS

- Ensuring continuous care to HIV infected exoffenders, in particular, those in need of HAART
- Recognizing that medical care is only part of the many needs of re-entering ex-offenders
- Linkage to medical services that are nested within a clinic that provides case management, substance abuse and mental health services is ideal

# Reentry Initiatives Show Promise for HIV-infected prisoners



### The Maryland AIDS Administration

- Funded Organization: Chase Brexton Healthcare,
   Health Education Resource Organization (HERO), and
   Total Health Care
- Organizations will meet the needs of 120 HIV-infected pre-release and recently released prisoners annually
- Assistance includes: obtaining ID and entitlements, housing, transportation, linkage to medical, substance abuse and/or mental health services and linkage to employment and educational opportunities

#### **Current Barriers**

- Reluctance to disclose HIV status prior to release
- Coordination with Correctional Facility
- Unpredictable release timing
- Continuity of medical care
- Substance Abuse

# The Way Forward

- The funded organizations are well poised to establish a solid foundation for transitional care of returning prisoners living with HIV/AIDS
- Health Sub-committee has been formed to deal with the health needs of all ex-offenders passing through Baltimore City's Reentry Center
- The collaboration of community based organizations with the AIDS Administration and the correctional system bridges the gap between incarceration and reintegration as well as serves as a powerful voice advocating for the health and rehabilitation needs of returning prisoners